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ABSTRACT

Attachment theory and stress-coping theory provided a basis for exploring how social cognitive components of internal working models may influence choice of coping strategies in stressful interpersonal situations. A multi-ethnic, non-clinical sample of 185 young adolescents was surveyed about their attachment styles; rejection sensitivity, attributions of hostile intent, social self-efficacy, and coping strategies. Reliability of all measures was addressed, and revised adolescent four-category attachment measures were evaluated for validity. A hypothesized model was proposed and tested through structural modeling. Social self-efficacy was found to be a potent mediator delineating how more securely attached adolescents become prosocial copers. Anxiously expecting and depressively reacting to rejection partially explained why adolescents with more fearful and preoccupied attachment styles tend to cope asocially and completely mediated pathways to anti-social coping. Adolescents with a more dismissing attachment style tended to deny concern about rejection but react angrily, leading to antisocial coping. An extensive discussion of the findings and suggestions for further research exploring finer distinctions of rejection sensitivity subscales as mediating mechanisms are given. (Contains 143 references.) (Author/JDM)

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ABSTRACT

Attachment theory and stress-coping theory provided a basis for exploring how social cognitive components of internal working models may influence choice of coping strategies in stressful interpersonal situations. A multi-ethnic non-clinical sample of 185 young adolescents was surveyed about their attachment styles, rejection sensitivity, attributions of hostile intent, social self-efficacy, and coping strategies. Reliability of all measures was addressed, and revised adolescent 4-category attachment measures were evaluated for validity. A hypothesized model was proposed and tested through structural modeling. Social self-efficacy was found to be a potent mediator delineating how more securely attached adolescents become prosocial copers. Anxiously expecting and depressively reacting to rejection partially explained why those with more fearful and preoccupied attachment styles tend to cope asocially and completely mediated pathways to antisocial coping. Adolescents with a more dismissing attachment style tended to deny concern about rejection but reacted angrily, leading to antisocial coping. An extensive discussion of findings and suggestions for further research exploring finer distinctions of rejection sensitivity subscales as mediating mechanisms are given.

Pathways to Social Coping Patterns in Adolescence:

Influences of Attachment and Social Cognition

Research on child coping clearly indicates that youth show significant variability in the acquisition of adaptive coping strategies or coping competence. Many clinical applications including psychotherapy and coping skills interventions focus on teaching appropriate cognitive and behavioral coping. Typically youth are able to demonstrate their understanding and use of the new strategies, but as many clinicians would agree, the new skills do not generalize well outside the treatment setting, nor do they endure temporally.

This problem can be understood in terms of a discord between the new strategies and an individual's pre-existing strategies based on assumptions or beliefs about self and others that arise from early relationship experiences. This has been noted as a gulf between developmental understanding and clinical intervention that leads to treatment of the symptom rather than its underlying basis.

Attachment theory holds that attachment styles, launched early in life through relationships with primary caregivers, contribute to the formation of early cognitive representations (called internal working models) that affect subsequent functioning. Extrapolating from attachment theory, the thesis of the present study is that organized mental representations of early attachment relationships are carried forward by the individual and serve to influence appraisal of social stressors and thus to inform choice of coping strategies in subsequent interpersonal contexts. Empirically, working model constructs have been relatively undefined and vague, and the processes through which they influence social coping unclear.

This study provides: (a) further clarification of the social-cognitive variables underlying the presently vague working model construct of attachment theory through identification of specific

social cognitions; (b) a cognitive-behavioral operationalization of attachment theory through identification of specific cognitive and behavioral coping strategies used by adolescents; (c) examination of the possible attachment-related origins of social cognition (e.g. hostile intent attributions) that have been demonstrated to underlie maladaptive outcomes; and (d) identification of familial and cognitive predictors of coping competence. This study potentially broadens the developmental focus of attachment theory to consider clinical aspects that may inform intervention in various educational and therapeutic settings.

Method

A multi-ethnic non-clinical sample of 185 young adolescents was surveyed about their attachment styles, rejection sensitivity, attributions of hostile intent, social self-efficacy, and coping strategies. The researcher introduced the study to students and teachers in the classroom and distributed a letter to students describing the purposes of the research and requesting consent for participation from parents. 5 trained psychology Ph.D. graduate student interviewers conducted face-to-face interviews. A hypothesized model was proposed and tested through structural modeling.

Results

Maximum likelihood estimation was employed to estimate all models. The independence model that tests the hypothesis that the variables are uncorrelated with one another was easily rejected, X^2 (45, $\underline{N}$ = 185) = 293.17, $p < .001$. The hypothesized model was tested next. Significant correlated error terms within variable groups (i.e. mediators, criterion variables) were allowed to covary to partial out response bias in modeling self-report data. A chi square difference test indicated a significant improvement in fit between the independence model and the hypothesized model, X^2_{diff} (39, $\underline{N}$ = 185) = 279.67, $p < .01$. Strong support was found for the hypothe-

sized model in examining all the fit indices appropriate for smaller sample sizes: the Satorra-Bentler scaled chi-square test statistic, X^2 (6, N = 185) = 7.78, p = .25; the Bentler-Bonett normed fit index (.95); the comparative fit index (.97); the robust comparative fit index (.99); and the Bollen IFI (.97). The standardized root mean squared residual index of .03 indicated a good fit to the data, as values of .05 or less are desirable. However, examination of differences between the Lisrel GFI and AGFI (.99 versus .87) indicated that the hypothesized model may have fit well because many parameters were estimated. Therefore, post hoc model modifications were performed in an attempt to develop a better fitting, more parsimonious model. On the basis of the Lagrange multiplier test, the Wald test, and theoretical relevance, 11 paths were deleted. The final model (Figure 4) fit the data well, Satorra-Bentler scaled X^2 (18, N = 185) = 20.05, p = .33; Robust CFI = .99. Comparison of Lisrel GFI (.97) with AGFI (.92) indicated this was a more parsimonious model, although a chi square difference test did not reveal that there was a significant improvement in fit, X^2_{diff}(12, N = 185) = 6.55, p > .25. Twenty-eight percent of the variance in asocial coping was accounted for by its predictors, 7 % for antisocial coping, and 3% for prosocial coping.

Discussion

Secure Attachment Style Profile.

The present study indicated that securely attached individuals tended to have greater social self-efficacy and less rejection sensitivity, were more likely to cope in a prosocial manner, and less likely to cope asocially. Social self-efficacy was identified as a full mediator of the relationship between secure attachment and both prosocial and asocial coping, with no direct effects. These results suggest that as part of securely attached adolescents' internal working models, positive evaluations of their social self-worth and positive perceptions of their specific social

competencies are implicated in their use of behavioral coping strategies that facilitate problem resolution and closer relationships and decrease their use of withdrawal, self-blame, and giving up strategies. These findings support the hypotheses of the present study, and help to explain attachment theory's notion that positive internal working models of self and others influence social development in a positive direction (Bowlby, 1977; Main, Kaplan, & Cassidy, 1985). This is consistent with previous research demonstrating greater coping effectiveness by securely attached preschoolers (Erez, 1995), greater use of relationship-oriented coping strategies by secure 10-year-olds (Grossman & Grossman, 1991), greater use of problem-focused coping strategies by adolescents securely attached to parents (Armsden, 1986), and greater use of support-seeking strategies with less distancing and less emotion-focused coping by more securely attached young adults (Mikulincer, Florian, & Weller, 1993; Mikulincer & Florian, 1995), as well as less rejection sensitivity (Feldman & Downey, 1994a).

Unique contributions of this portion of the findings include demonstration of the role of social self-efficacy alone and as a full mediator with both prosocial and asocial coping. Although theoretically, secure individuals have positive models of both self and other, and in this study, demonstrated greater social self-efficacy and less rejection sensitivity, it is specifically the social self-efficacy that mediates between secure attachment and prosocial and asocial behavior.

Fearful Attachment Style Profile.

Adolescents with a fearful attachment style (having negative models of both self and others) were more rejection sensitive, lower on social self-efficacy, and tended to be asocial and/or antisocial copers. As hypothesized, there was a direct effect of fearful attachment on asocial coping and partial mediation through rejection sensitivity and social self-efficacy, indicating that a proportion of the influence of fearful attachment style on asocial coping was not related to rejection

sensitivity or social self-efficacy and implying there may be other mediating variables not addressed by the present study. These findings suggest that individuals with negative models of both self and others tend to be more inclined to anxiously expect rejection from others and to feel less competent and worthy socially, and that this influences their tendency to cope through strategies such as withdrawal, self-blame, or giving up, as well as through blaming others, venting emotions, and/or engaging in behavior destructive to self or others. The findings are consistent with Grossman and Grossman (1991) who found avoidantly attached 10-year-olds reported trying to work problems out without help and staying to themselves, and with Mikulincer, Florian, & Weller (1993) who showed avoidants used less support seeking coping strategies.

Contrary to hypotheses of no relationship between fearful attachment and antisocial coping, rejection sensitivity was shown to fully mediate a relationship between fearful attachment and antisocial coping. Although avoidant attachment (which includes both dismissing and fearful styles) has been associated with antisocial or disruptive behavior (Renken et al., 1989; Speltz, Greenberg, & Deklyen, 1990), few studies have separated them out and it was felt that fearfuls would tend toward the asocial side while dismissings would tend toward antisocial coping. These findings add to our understanding of why fearful avoidants are introverted and unassertive, and report being anxious, depressed, but also hostile, as adults (Bartholomew & Horowitz, 1991; 1993). It is unclear as to why fearful avoidance is associated with both asocial and antisocial coping, although this study suggests that rejection sensitivity has a greater role in the path to antisocial coping. Further research would be useful in delineating specific coping domains within asocial and antisocial subscales that characterize fearful avoidants.

Preoccupied Attachment Style Profile.

Preoccupied individuals (with negative self and positive other models) had profiles similar to

fearful avoidants in the present study. They tended to be rejection sensitive, and to cope both asocially and antisocially, although hypotheses suggested they would be less likely to cope anti-socially and more likely asocial and prosocial. Previous research had indicated ambivalent (i.e. preoccupied) attachment was related to social withdrawal and loneliness in young children (Berlin, Cassidy, & Belsky, 1991), and in one study, 4-year-old ambivalents were significantly higher on prosocial behavior than avoidants, although more often gave up during problem solving (Erez, 1995).

The present findings do converge with adult research demonstrating that preoccupieds worry about rejection during interactions (Mikulincer & Nachson, 1991), and as adults they tend to be controlling and intrusive (Kunce & Shaver, 1994), asserting their needs without considering those of others (Daniels and Shaver, 1991, cited in Shaver, Collins & Clark, 1996). Rosenstein and Horowitz (1996), in a clinical sample of adolescents, found preoccupieds were more likely to have an affective disorder, anxiety, and obsessive-compulsive, histrionic, borderline, or schizotypal personality disorder.

The present findings also indicated that, like fearful avoidants, preoccupieds' rejection sensitivity fully mediated the relationship between attachment and antisocial coping, and partially mediated the relationship with asocial coping as hypothesized. The importance of rejection sensitivity as a mediator with maladaptive coping styles was stronger for preoccupieds than fearfuls. Because preoccupieds have positive other models, they appear to be more hypervigilant than fearfuls about others' approval, and since they have negative models of self, may expect others would see them the same way. This is consistent with the unique activation tendencies engendered by this combination of negative self and positive other models, which leads to more active attempts than fearfuls to hold onto others but frequently backfires producing rejection by others

(Shaver, Collins, & Clark, 1996).

Dismissing Attachment Style Profile.

Adolescents who were higher on dismissing attachment style (also termed dismissing avoidance) were less sensitive to rejection. This diverges from hypotheses that expected increased rejection sensitivity, based on Feldman & Downey's (1994a,b) findings that avoidant adolescents reported increased rejection sensitivity. However their measure combined fearful and dismissing avoidants, whereas adult attachment research drawing a distinction between the two styles indicated dismissing avoidants are defensively autonomous and not dependent (Bartholomew & Horowitz, 1991), and may deny any anxiety about rejection by others.

Findings also revealed dismissing avoidants were more likely to cope using antisocial strategies such as blaming others, venting emotions, and/or engaging in behavior destructive to self or others, converging with findings that dismissing avoidant adolescents in a clinical sample were more likely to have narcissistic, paranoid, or antisocial personality and conduct or substance abuse disorders (Rosenstein & Horowitz, 1996). This was a direct relationship not mediated by hostile attributional bias as hypothesized. The lack of association with hostile attributional bias suggests that it is not attachment style that explains the development of this cognitive tendency that has already been established to predict antisocial behavior (and does so in the present study), or that their denial of concern about others influences their reports on this interview measure. However there were also indirect effects of dismissing attachment on antisocial coping mediated by rejection sensitivity such that less rejection sensitivity increased antisocial coping, again contrary to hypotheses. A possible explanation for these findings is that with their defensive tendencies to deny distress and contain affect, their symptomatic expression becomes directed against others. They turn to antisocial strategies rather than reach out to others or withdraw like proso-

cials and asocials to cope. Little research has operationalized internal working models of dismissing avoidants versus fearful avoidants. Interestingly, through examination of zero-order correlations in Tables 7 and 8, it appears it is angry reaction to rejection (not included in the structural model) that may be more important in mediating the dismissing attachment-antisocial coping relationship.

Conclusions

In summary, social self-efficacy was found to be a potent mediator delineating how more securely attached adolescents become prosocial copers while the less securely attached become asocial copers. Anxiously expecting and depressively reacting to rejection partially explained why those with more fearful and preoccupied attachment styles tend to cope asocially and completely mediated pathways to antisocial coping. Adolescents with a more dismissing attachment style tended to deny concern about rejection but reacted angrily, leading to antisocial coping.

Limitations notwithstanding, the results of the present study provide empirical support for the utility of integrating attachment theory and stress-coping theory via operationalization of internal working models with social cognitive constructs. Working models of attachment, held to influence perception and interpretation of events, and direction of feelings, behavior, and memory, were partially defined here in social cognitive terms as social self-efficacy and rejection sensitivity. These social cognitive variables were then theorized to influence stress-coping theory's primary appraisal of the stressfulness of a stressful interpersonal situation, as well as secondary appraisal of resources and options for coping with the stress. These linkages were supported statistically in the present study through correlations and testing of mediational paths within the structural model

Identification of attachment-related coping deficits and their underlying social cognitive con-

comitants can inform intervention by providing a basis for changing old belief systems and behavioral strategies that are no longer adaptive or desirable (Collins & Read, 1994). Adolescents can be taught how to actively reject old beliefs and replace maladaptive strategies which can become automatic with repeated practice.

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